

Saint Michael's College

GRADUATE PROGRAMS

TRANSFER OF CREDIT

Student ID Number _____

I, _____ (please print) am applying to transfer the following credits to be counted toward the requirements for my graduate program at Saint Michael's College.

Please check the program in which you are enrolled:

- Clinical Psychology (Box 288)
- Education (Box 281)
- TESOL (Box 253)

| Course No. | Title | Credits | Institution's Name | Date Completed |
|------------|-------|---------|--------------------|----------------|
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With approval of your program director, a maximum of six graduate credits for TESOL and nine graduate credits for Clinical Psychology and Education, not accrued more than five years ago, may be transferred from another accredited institution, provided a grade of "B" or better has been attained. Credits that have been applied to complete a degree are not transferable. Transfer credits will be recorded only after completion of at least twelve credits, or upon granting of Candidacy, in the program. *There is a \$15.00 per-credit transfer fee.*

Please send: 1) Completed form, 2) a check for the per-credit transfer fee, 3) your official transcript(s)* together in one envelope to your graduate program, Box (above), c/o Saint Michael's College, One Winooski Park, Colchester, VT 05439.

**Transcripts must come directly from the institution to you and remain in the sealed envelope to be official.*

Student signature _____ Enclosed: \$ _____
Date

Address _____
Street

City State ZIP

E-mail _____

Approval _____
Program Director signature Date